

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	VT	69607	6/1/00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	VL	20017	2/22/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

15833 486202
03/5/02

APPLICANTS

TITLE

IN

sub has not of this WA The Pos

Form (Rev.)

SHAC
SEC
09/24/00

Claim	Final	Original	Date
1	✓	✓	6/3/00
2	✓	✓	6/3/00
3	✓	✓	6/3/00
4	✓	✓	6/3/00
5	✓	✓	6/3/00
6	✓	✓	6/3/00
7	✓	✓	6/3/00
8	✓	✓	6/3/00
9	✓	✓	6/3/00
10	✓	✓	6/3/00
11	✓	✓	6/3/00
12	✓	✓	6/3/00
13	✓	✓	6/3/00
14	✓	✓	6/3/00
15	✓	✓	6/3/00
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18	✓	✓	6/3/00
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42	✓	✓	6/3/00
43	✓	✓	6/3/00
44	✓	✓	6/3/00
45	✓	✓	6/3/00
46	✓	✓	6/3/00
47	✓	✓	6/3/00
48	✓	✓	6/3/00
49	✓	✓	6/3/00
50	✓	✓	6/3/00

Claim	Final	Original	Date
51	✓	✓	6/3/00
52	✓	✓	6/3/00
53	✓	✓	6/3/00
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82	✓	✓	6/3/00
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85	✓	✓	6/3/00
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97	✓	✓	6/3/00
98	✓	✓	6/3/00
99	✓	✓	6/3/00
100	✓	✓	6/3/00

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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